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COMBINED DECLARATION AND POWER OF ATTORNEY

As a below named inventor, I hereby declare that

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:							
the	specificati	on of which:	(check one)				
	REGULAR OR DESIGN APPLICATION						
	[]	is attached hereto.					
was filed on as application Serial No and was amended on (if applicable).					o. 		
PCT FILED APPLICATION ENTERING NATIONAL STAGE							
	was described and claimed in International application No. PCT/JP01/03205 filed on April 13, 2001 and as amended on (if any).						
hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above. I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal							
Regulations, §1.56.							
PRIORITY CLAIM I hereby claim foreign priority benefits under 35 USC 119 of any foreign application(s) for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate having a filing date before that of the application on which priority is claimed.							
PRIOR FOREIGN APPLICATION(S)							
	Соц	intry	Application Number	Date of Filing (day, month, year)	Priority Claimed		
	Japan		2000-114461	14, 04, 2000	yes		
I he mat by t defi	reby claim the ter of each of the first paragoned in Title 3	ne benefit under the claims of this raph of 35 USC 7 Code of Federa	s application is not disclosed in 112. Lacknowledge the duty	itates application(s) listed below a n the prior United States applicatio to disclose information which is n ame available between the filing d ation:	on in the manner provided		
	(Applica	tion Serial No.)	(filing Date)	(Status-patented, pending,	abandoned)		

POWER OF ATTORNEY

The undersigned hereby authorizes the U.S. attorney or agent named herein to accept and follow instructions from Universal Patent Bureau as to any action to be taken in the Patent and Trademark Office regarding this application without direct communication between the U.S. attorney or agent and the undersigned. In the event of a change in the persons from whom instructions may be taken, the U.S. attorney or agent named herein will be so notified by the undersigned.

As a named inventor, I hereby appoint the following attorney(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith: Robert J. PATCH, Reg. No. 17,355, Andrew J. PATCH, Reg. No. 32,925, Robert F. HARGEST, Reg. No. 25,590, Benoît CASTEL, Reg. No. 35,041, Eric JENSEN, Reg. No. 37,855, Thomas W. PERKINS, Reg. No. 33,027, and Roland E. LONG, 7 Jr., Reg. No. 41,949, c/o YOUNG & THOMPSON, Second Floor, 745 South 23rd Street, Arlington, Virginia 22202.

Address all telephone calls to Young & Thompson at 703/521-2297.

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

and application of	any patent issued thereon.
full name of sole or first inventor: Masao MATSUDA (given name, family name)	
thventor's signature 7/1. Malsude	Date November 16, 2001
Residence: Tokyo, Japan JPX	Citizenship: Japanese
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⇒ - 	•
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Inventor's signature / Kouyama	Date November 16, 2001
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Full name of third joint inventor, if any: (given name, family name)	
Inventor's signature	Date
Residence:	Citizenship:
Post Office Address:	·